

MASON TOWNSHIP
 PO BOX 386
 Union MI 49130
 574-903-0826
 EMAIL: Chelsagreathouse@gmail.com

Permit #	
Fee	\$50.00
Method of Payment	
Date Deemed Complete	
Received By	

MAKE CHECK PAYABLE TO MASON TOWNSHIP

<p>A drawing (site plan shown from a "bird's eye" view) indicating property lines, location of all the buildings presently on the property and the location of the proposed new structure(s), must be submitted with this application. The site plan should also include measurements from your new project to property lines and distances between all structures. An application will not be deemed complete or processed until the permit fee has been paid, a site plan submitted, proof of ownership provided, and this form completed. "Change of Use" applications are exempt from providing a site plan as indicated and instead, will provide a statement of the proposed new use of the existing structure.</p>	
Project Location / Property Owner Information	
Street Address	
Parcel Number	14-060-
Municipality <input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Township of: Mason	
Name of Property Owner	
Address	City, State Zip
Telephone	Email
Contractor / Engineer Information	
<input type="checkbox"/> Contractor <input type="checkbox"/> Engineer	
Name	
Company	
Address	City, State Zip
Telephone	Email
Type of Project (Please mark as many as are applicable)	
<input type="checkbox"/> New Construction	<input type="checkbox"/> Multifamily
<input type="checkbox"/> Addition	<input type="checkbox"/> Non-Residential
<input type="checkbox"/> Alteration / Remodel	<input type="checkbox"/> Special Land Use
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Site Plan Requirements

The Following Items are Required to be Submitted:

Applicant Checklist	Description of Requirement	Zoning Administrator Check Off
	Site Plan drawn to scale, descriptive legend with North listed	
	Location of main building and all accessory buildings, existing and proposed	
	Location of yards, driveways, walks, recreation areas and other site improvements	
	Proposed storm drainage facilities. Proof of Drain Commission sign off may be required.	
	Surrounding streets and nearby buildings	
	Proposed building plans	
	Parking areas including ingress/egress, drainage, dimensions and number of parking spaces, dimensions and number of handicap accessible spaces. Proof of Driveway Permit may be	
	External Lighting	
	Signage	
	Additional Information as requested by the Commission	

I, the undersigned, affirm that the foregoing answers, statements, and information and any attachments are in all respects true and correct to the best of my knowledge and belief. I understand that the Site Plan Review applied for, if granted, is issued on the representations made herein and that any Permit subsequently issued may be revoked because of any breach of representations or conditions, or because of the lack of continued conformance with zoning ordinance requirements. I understand that incomplete applications which also includes application fees will not be processed. Incomplete applications will be closed after 45 days of receipt, applicant will have to re-submit including all applicable fees. I, the undersigned, fully understand that acceptance and/or approval of this application for site plan review does not confer approval by any other municipal entity. I, the undersigned, authorize the Zoning Administrator and any other person authorized by the Zoning Administrator, to enter onto the property subject to this permit hereon for the purpose of conducting inspections for compliance. Failure by the undersigned to permit such inspections shall result in the Site Plan Review Application being denied, or immediate termination of the permit that has been issued. I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and agree to conform to all applicable laws of the State of Michigan. I understand that the Zoning Administrator may require that a survey be performed to verify information regarding the property and/or buildings and/or structures located on the parcel.

APPLICANT SIGNATURE	DATE
PROPERTY OWNER SIGNATURE	DATE

OFFICIAL USE ONLY		
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved with Conditions	<input type="checkbox"/> Denied
Zoning Administrator Signature	Date:	

